OMB APPROVAL

OMB Number:

3235-0076

lav 31, 2005



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES

| 209 | PURSUANT TO REGULATION D | 07050466 |
|---|---|--|
| | SECTION 4(6), AND/OR | 1 |
| U | NIFORM LIMITED OFFERING EXEM | IPTION |
| Name of Offering (check if this is Odyssey Diversified VI, LLC Secured 9.0 | an amendment and name has changed, and indicate change.) % Notes | |
| Filing Under (Check box(es) that apply): Type of Filing: New Filing | |) ULOE |
| | A. BASIC IDENTIFICATION DATA | |
| 1. Enter the information requested about | ut the issuer | |
| Name of Issuer (check if this is an | amendment and name has changed, and indicate change.) | • |
| Odyssey Diversified VI, LLC | | · |
| Address of Executive Offices | (Number and Street, City, State, Zip Code) | Telephone Number (Including Area Code) |
| 500 South Florida Ave., Suite 700, Lakela | nd, FL 3380! | (863) 683-6141 |
| Address of Principal Business Operations (if different from Executive Offices) | (Number and Street, City, State, Zip Code) | Telephone Number (Including Area Code) |
| Brief Description of Business | | 202052 |
| The issuer will invest all of the net proceed | ds of this offering in real estate acquisition and/or development pro | processed PROCESSED |
| Type of Business Organization corporation business trust | limited partnership, to be formed limited | please specify): APR 0 9 2007 Iliability company THOMSON |
| Actual or Estimated Date of Incorporation Jurisdiction of Incorporation or Organiza | Month Year n or Organization: 0 1 0 7 | mated FINANCIAL : FIL |
| GENERAL INSTRUCTIONS | | |
| Federal: Who Must File: All issuers making an offe 77d(6). | ring of securities in reliance on an exemption under Regulation D o | or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. |
| and Exchange Commission (SEC) on the | later than 15 days after the first sale of securities in the offering earlier of the date it is received by the SEC at the address given be by United States registered or certified mail to that address. | . A notice is deemed filed with the U.S. Securities elow or, if received at that address after the date on |
| Where To File: U.S. Securities and Exchi | ange Commission, 450 Fifth Street, N.W., Washington, D.C. 20: | 549. |
| Copies Required: Five (5) copies of this a photocopies of the manually signed copy | notice must be filed with the SEC, one of which must be manuall or bear typed or printed signatures. | y signed. Any copies not manually signed must be |
| | contain all information requested. Amendments need only report C, and any material changes from the information previously suppl | |
| Filing Fee: There is no federal filing fee | - | · |
| ULOE and that have adopted this form. are to be, or have been made. If a state to | ance on the Uniform Limited Offering Exemption (ULOE) for so a lissuers relying on ULOE must file a separate notice with the S requires the payment of a fee as a precondition to the claim for the filed in the appropriate states in accordance with state law. | securities Administrator in each state where sales r the exemption, a fee in the proper amount shall |
| | ATTENTION | |
| | opriate states will not result in a loss of the federal e of result in a loss of an available state exemption unle | |

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (6-02)

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. General and/or Executive Officer Director Check Box(es) that Apply: Promoter Beneficial Owner Managing Partner Larry W. Maxwell Full Name (Last name first, if individual) 500 South Florida Ave., Suite 700, Lakeland, FL 33801 Business or Residence Address (Number and Street, City, State, Zip Code) General and/or Promoter Director Check Box(es) that Apply: Managing Partner L. Todd Maxwell Full Name (Last name first, if individual) 500 South Florida Ave., Suite 700, Lakeland, FL 33801 Business or Residence Address (Number and Street, City, State, Zip Code) General and/or ☐ Beneficial Owner ☐ Executive Officer ☐ Director Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) General and/or Beneficial Owner Executive Officer Director Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) General and/or Executive Officer Check Box(es) that Apply: Beneficial Owner Director Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Beneficial Owner Executive Officer General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Beneficial Owner Executive Officer General and/or Promoter . Director Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary)

| | | | | | B. INF | ORMATI | ON ABOU | T OFFER | UNG | | | | |
|-------|----------------------|-------------|--------------------------------|--------------|-------------|---------------|------------|---------------|--------------|--------------------------------|-------------|----------|----------|
| 1. | Hac the | issuer so | ld, or does t | the issues i | ntend to se | ell to non- | accredited | investors | in this offi | ering? | | Yes | No ⊠ |
| ١. | iias uic | 133461 30. | 14, 01 4003 1 | | | | , Column 2 | | | | | ш | |
| 2. | What is | the minin | num investr | | | • • | | _ | | • | | \$ 50,00 | 10 00 |
| 2. | ** 1141 13 | the minne | | ment that w | in oc acc | pica nom | any more | | ••••• | | | Yes | No |
| 3. | Does th | e offering | permit join | t ownershi | pofasing | le unit? | ••••• | | | | | | |
| | | | tion request | | • | | | | | - | | | |
| | | | rilar remune sted is an as: | | | • | | | | | • | | |
| | | | ame of the b | | | | | | | ciated pers | ons of such | | |
| | | | , you may s first, if indi | | iniormati | on for that | DIOKET OF | iealer only | | | | | |
| | Name () lugh, Sco | | rirst, it indi | ividual) | | | | | | | | | |
| | | | Address (N | lumber and | Street, Ci | ty, State, 2 | ip Code) | | | | | | |
| | | | e, Suite 520, I | | | | | | | | | | |
| Nam | e of As | sociated B | roker or De | aler | | | | | | | | | |
| | | rities, LLC | | | | | | | | | | | |
| | | | n Listed Has | | | | | | • | | | - A | P 54-4 |
| | (Check | "All State. | s" or check | individual : | States) | | | | | | ······ | . L ^1 | - States |
| | AL | AK | AZ | AR | CA | CO | СТ | DE | DC | 5 / | S/ | HI | ID |
| ļ | IL. | IN | 1A | KS | KY | LA | ME | MD | MA | МІ | MN | MS | МО |
| ļ | МТ | NE | NV | NH | נא | NM | NY | NC | ND | ОН | OK | OR | PA |
| * | RI | SC | SD | TN | TX | UT | [VT] | [VA] | WA . | $[\underline{w}\underline{v}]$ | <u>wı</u> | WY | PR |
| Full | Name (| Last name | first, if indi | ividual) | | | | | | | | | , |
| Busi | iness or | Residence | Address (N | Number and | Street, C | ity, State, | Zip Code) | . | | | | | |
| | | | | | | | | | | | | | |
| Nam | e of As | sociated B | roker or De: | aler | | | | | | • | | | |
| State | es in Wi | ich Person | n Listed Has | s Solicited | or Intends | to Solicit | Purchasers | | | | • | | |
| | (Check | "All State | s" or check | individual | States) | | | | | | | □ AI | 1 States |
| í | AI | AK | AZ | AR | CA | CO | СТ | DE | DC | FL | GA | Щ | ΙD |
| ı | IL I | IN | IA | KS | KY | LA | ME | MD | MA | MI | MN | MS | MO |
| ľ | MT | NE | NV | NH | [Z] | NM | NY | NC | ND | ОН | ОК | OR | PA |
| i | RI | SC | SD | TN | TX | UT | VT | VA | WA | wv | WI | WY | PR |
| Full | | Last name | first, if indi | ividual) | | | | | | | | | |
| | • | | , | · | | | | | | | | | |
| Busi | ness or | Residence | Address (N | lumber and | Street, C | ity, State, i | Zip Code) | | | | | | |
| Nam | c of As | sociated B | roker or De | aler | | | | | | | | - | |
| State | es in Wh | ich Person | n Listed Has | s Solicited | or Intends | to Solicit | Purchasers | . | | | | | |
| | | | s" or check | | | | | | | | ••••• | ☐ AI | 1 States |
| ſ | AL | AK | AZ | AR | CA | co | СT | DE | DC | FL | GA | н | ID |
| j | IL. | IN | IA | KS | KY | LA | ME | MD | MA | MI | MN | MS | МО |
| į | MT | NE | NV | ИН | ГИ | NM | NY | NC | ND | OH | OK | OR | PA |
| [| RI | SC | SD | TN | TX | UT | VT | VA | WA | wv | WI | WY | PR |

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

B.4. (add'l.)

Gramercy Securities, Inc. 3949 Old Post Road Charleston, RI 02813 AZ, CA, CO, CT, FL, GA, HI, LA, NM, NY, OH, OK, OR, RI, TX, UT, VT

Stanford Group Company 5051 Westheimer Houston, TX 77056 All States

Integrated Trading and Investments 9505 Hillwood Dr. Ste. 160 Las Vegas, NV 89134 AZ, CA, CO, FL, IL, KS, MO, NJ, NV, TX, UT, WI

VSR Financial Services, Inc. 8620 W 110th Street Suite 200 Overland Park, KS 66210 All States

Investors Capital Corporation 230 Broadway East 203 Lynnfield, MA 01940-2320 All States

Capital Financial Services, Inc.

1 North Main Street
Minot, ND 58703
All States

Allen & Company of Florida, Inc. 1401 S. Florida Ave. Lakeland, FL 33803 AZ, AR, CA, CO, CT, DE, FL, GA, IL, IA, KY, LA, MD, MA, MI, MN, MS, MT, NE, NV, NH, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, TX, UT, WA

GunnAllen Financial 5002 W. Waters Avenue Tampa, FL 33634 All States

Brookstreet Securities 2361 Campus Dr. #210 Irvine, CA 92612 All States

DeWaay Financial Network 13001 University Ave. Clive, IA 50325 AK, AL, AR, AZ, CA, CT, DC, FL, GA, HI, IA, ID, IL, IN, KS, MA, MI, MN, MO, NC, ND, NE, NM, NV, NY, OH, OK, OR, PA, SC, SD, TX, VA, WA, WI

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

| ١. | Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check | | | | |
|----|--|-------------|--------------------|--------------|--|
| | this box and indicate in the columns below the amounts of the securities offered for exchange and | • | | | |
| | already exchanged. | A | ggregate | Aı | nount Already |
| | Type of Security | | ering Price | | Sold |
| | Debt | s <u>20</u> | ,000,000.00 | <u>s</u> | 1,805,000.00 |
| | Equity | \$ | | S | |
| | Common Preferred | | | | 14 |
| | Convertible Securities (including warrants) | s | | s | |
| | Partnership Interests | s | | s | |
| | Other (Specify): | S _ | | s | |
| | Total | | | s | 1,805,000.00 |
| | Answer also in Appendix, Column 3, if filing under ULOE. | | | | |
| 2. | Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." | | | | · |
| | | - | Number nvestors | | Aggregate Pollar Amount of Purchases |
| | Accredited Investors | | 25 | . s _ | 1,805,000.00 |
| | Non-accredited Investors | | | s _ | |
| | Total (for filings under Rule 504 only) | | 25 | s _ | 1,805,000.00 |
| | Answer also in Appendix, Column 4, if filing under ULOE. | | | | |
| 3. | If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1. | | | | |
| | Type of Offering . | | ype of ecurity | D | ollar Amount Sold |
| | Rule 505 | <u> </u> | - | _ \$_ | |
| | Regulation A | | | <u> </u> | |
| | Rule 504 | | · | _ s _ | |
| | Total | | | _ s _ | |
| 4. | a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. | | | | |
| | Transfer Agent's Fees | | | s | |
| | Printing and Engraving Costs | | | s | |
| | Legal Fees | | | S | |
| | Accounting Fees | | | s | |
| | Engineering Fees | ••••• | | \$_ | |
| | Sales Commissions (specify finders' fees separately) | | | | 1,200,000.00 |
| | Other Expenses (identify) Other broker-dealer fees | | i a | <u>s</u> | 200,000.00 |
| | Total | | 🛛 | s _ | 1,400,000.00 |

| b. Enter the difference between the aggregate offering price given in response to Part C—Question 1 and total expenses furnished in response to Part C—Question 4.a. This difference is the "adjusted gross proceeds to the issuer." | , d | \$_18,600,000.00 |
|--|--|--|
| Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C—Question 4.b above. | | |
| | Payments to Officers, Directors, & Affiliates | Payments to Others |
| Salaries and fees | \$ 800,000.00 | s |
| Purchase of real estate |] s | □ s |
| Purchase, rental or leasing and installation of machinery and equipment |] \$ | s |
| Construction or leasing of plant buildings and facilities |] s | s |
| Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger) |] \$ | |
| Repayment of indebtedness |) s | . S |
| Working capital |) \$_ | . 🗆 s |
| Other (specify): Investment in real estate properties | s <u> </u> | s |
| |]\$ | s |
| Column Totals | 18,600,000.0 \$0 | . 🗆 s |
| Total Payments Listed (column totals added) | ⊠ \$ <u>_1</u> ; | B,600,000.00 |
| D. FEDERAL SIGNATURE | | |
| ne issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is gnature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exclange Commission information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Ru | on, upon writte | tle 505, the following request of its staf |
| suer (Print or Type) Signature D | ate / | * |
| dyssey Diversified VI, LLC | 3/29 | , 2007 |
| ame of Signer (Print or Type) | 1 | |
| | | |

intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)